Visiting Preceptorship in Intraoperative Transesophageal Echocardiography

PLEASE FILL OUT YOUR INFORMATION COMPLETELY: *(All fields required)*

NAME _____

ORGANIZATION _____

CREDENTIALS / TITLE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____

EMAIL _____

PLEASE CHECK ✓ TO INDICATE YOUR CHOICES:

Course: ☐ $4,500.00

Additional Days: ☐ $1,250.00 (one day)
☐ $2,500.00 (two days)

PLEASE CHECK ✓ TO SELECT THE DATES BELOW:

Available Dates: ☐ January 23 - 25
☐ February 20 -22
☐ March 27 - 29
☐ April 17 - 19
☐ May 8 - 10
☐ June 26 - 28
☐ September 25 - 27
☐ October 16 - 18
☐ November 27 - 29

Additional Days: ☐ _____

Payment Method: All payments are in US dollars.

☐ Check ☐ Credit Card

Please make checks payable to and mail to:
Duke University Medical Center FEID: 56-0532129
DUMC, Anesthesiology (TEEPS)
Box 3094, Mail # 42
Durham, NC 27710

Credit Card Payments: *(Please check ✓ card type)*

☐ MasterCard ☐ VISA ☐ American Express ☐ DISCOVER

CARD NUMBER _____ EXP _____

NAME ON CARD *(If Different from Registrant)* _____

BILLING ADDRESS *(If Different from Registrant)* _____

CITY _____ STATE _____ ZIP _____

SIGNATURE _____

Registrations with credit card payments ONLY may be faxed to:
Duke University Department of Anesthesiology at (919) 681-8994
(Attn: Audrey McGregor)

For activity questions, please contact Audrey McGregor, Activity Coordinator, at 919- 684-0862 or audrey.mcgregor@duke.edu.

For registration questions, please contact Duke Conference Services at (919) 660-1760 or conferenceservices@duke.edu.

REGISTRATION FORM

Duke Perioperative TEE Service
Duke University Medical Center
Durham, North Carolina

Course Registration Fee:
$4,500.00 for the three-day session.

Payments must be made at least 6 weeks prior to start date. If paying by check, please ensure that the payment along with the paper registration form is submitted at least 6 weeks prior to the start date for the preceptorship (postmark on payment packet will be used). If payment is not received at least 6 weeks prior to the start date, the registration will not be processed and the dates may be provided to the next individual on the waiting list. After the check is received, the dates requested will then be blocked off, if they are still available. Registration confirmations will be mailed to the address provided.

Additional days: If preceptees wish to extend their preceptorship experience beyond the three-day session, they may do so at a charge of $1,250 USD per day for a maximum of two subsequent and consecutive days. Preceptees must indicate at the time of registration and include the additional amount with the registration fee. **The extended days are not a part of the CME-approved course and CME credits will not be awarded for activities on extended days.**

DukeHealth

JOINTLY ACCREDITED PROVIDER™
INTERPROFESSIONAL CONTINUING EDUCATION

Joint Accreditation Statement
In support of improving patient care, the Duke University Health System Department of Clinical Education and Professional Development is accredited by the American Nurses Credentialing Center (ANCC), the Accreditation Council for Pharmacy Education (ACPE), and the Accreditation Council for Continuing Medical Education (ACCME), to provide continuing education for the health care team.

Provider Statement
Directly provided by the Duke University Health System Department of Clinical Education and Professional Development.

Education Credits
Category 1: Duke University Health System Department of Clinical Education and Professional Development designates this CE activity for a maximum of 15.5 AMA PRA Category 1 Credits™. Physicians should claim only credit commensurate with the extent of their participation in the activity.

Resolution of Conflict of Interest
Duke University Health System Clinical Education and Professional Development has implemented a process to resolve any potential conflicts of interest for each continuing education activity in order to help ensure content objectivity, independence, fair balance, and the content that is aligned with the interest of the public.

Disclosure Statement
It is the policy of the Duke University Health System Clinical Education and Professional Development to require the disclosure of anyone who is in a position to control the content of an educational activity. All relevant financial relationships with any commercial interests and/or manufacturers must be disclosed to participants at the beginning of each activity.

Disclaimer
The information provided at this CME activity is for continuing medical education purposes only and is not meant to substitute the independent medical judgment of a physician relative to diagnostic and treatment options of a specific patient's medical condition.

Special Needs
The Duke University School of Medicine's Department of Anesthesiology is committed to making its activities accessible to all individuals. If any participant in this educational activity is in need of accommodations, please do not hesitate to notify us by phone or email in order to receive service. Please contact Audrey McGregor, Activity Coordinator, at 919- 684-0862 or audrey.mcgregor@duke.edu.